

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc		2/4/00
O.I.P.E. CLASSIFIER	ASD		2/22/00
FORMALITY REVIEW		710310	3/2/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

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Form PTO-436A
 (Rev. 6/99)

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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